MINNESOTA STATE UNIVERSITY, MANKATO

RECREATION & PARKS LEADERSHIP STUDIES

FIELD EXPERIENCE VERIFICATION

This portion to be completed by the Student:

Student: It is your responsibility to submit this form. Prior to your senior practicum, you are required to obtain and verify 150 hours of professional experiences in leisure services. At least 100 hours must be earned at one agency. One form must be completed for each different agency/position. Completed forms should be returned to your advisor via email or in person. This form is also available online.

Student Name		Student Email
Tech ID	D Anticipated Graduation (Semester/Year)	
Emphasis Area(s): LPM	RM TR	Academic Advisor/Email:
Agency Supervisor		Supervisor Job Title
Agency Name		
Agency Street Address		
Agency Phone ()		Email
Dates of work: Started:		Ended:
employment dates and hours Upon receipt of this form, we Thank you for being a vital po	s listed below and pro may contact you to j art of our students' p	essional development of our students, we ask that you verify the ovide us with a brief evaluation of the student's performance. follow up on your experience with this student. rofessional development. Total Hours
		n Employee Other (please specify)
Nature of work with the ag	gency (please summ	narize or attach job description)
Evaluation of Student Per	formance (please e	explain) It with professional expectations of volunteers, interns, or trainees.
<u>Unacceptable</u> – Perfo	ormance was inade	quate or inconsistent and must improve. (please provide examples)
Agency Supervisor Signatu	re	